2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007426

FILED Apr 16, 2009 Secretary of State

Entity Name: SWIFT CREEK TOWNHOME OWNERS' ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 4400 HIGHWAY 20, SUITE 312 NICEVILLE,, FL 32578 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 5036 4400 HIGHWAY 20, SUITE 312 NICEVILLE,, FL 32578 FEI Number: 20-2470848 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DONALDSON, PATRICIA 1571 HICKORY STREET NICEVILLE, FL 32578 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HUNT, DALE Name: Name: 234 WHITE STREET, UNIT 11 Address: Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: LYTTLE, MARILYN Name: TURK, MARILYN Address: 234 WHITE STREET, UNIT 10 Address: 107 BERMUDA WAY City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: NICEVILLE, FL 32578 Title: () Delete Title: () Change () Addition ROBBINS, CHAN Name: Name: 232 WHITE STREET UNIT 5 Address: Address: City-St-Zip: NICEVILE, FL 32578 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SMITH, MICHAEL Name: FARLEY, EDWARD 310 CYPRESS STREET Address: 232 WHITE STREET UNIT 4 Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE HUNT PD 04/16/2009